



THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Steven N. Roe et al.
Appl. No. : 09/732,835
Filing Date : 12/07/2000
Title : APPARATUS AND METHODS FOR DELIVERING A CLOSURE
DEVICE
Group Art Unit : 3743
Examiner : Kathryn P. Ferko
Docket No. : 701879.5 (formerly 257/271)

RECEIVED

JAN 02 2004

TECHNOLOGY CENTER R3700

Mail Stop Fee-Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE/AMENDMENT TRANSMITTAL

Transmitted herewith is a response/amendment in the above-identified application in connection with the Office Action dated September 11, 2003.

Applicant hereby petitions for an extension of time under 37 CFR § 1.136 [fees: 37 CFR § 1.17(a)(1)-(5)] for the total number of months checked below:

| EXTENSION (months) | FEE FOR SMALL ENTITY | FEE FOR OTHER THAN SMALL ENTITY |
|---|-------------------------|------------------------------------|
| <input checked="" type="checkbox"/> one month | \$55.00 | \$110.00 |
| <input type="checkbox"/> two months | \$210.00 | \$420.00 |
| <input type="checkbox"/> three months | \$475.00 | \$950.00 |
| <input type="checkbox"/> four months | \$740.00 | \$1,480.00 |
| <input type="checkbox"/> five months | \$1,005.00 | \$2,010.00 |

12/29/2003 JBALINAH 00000035 150665 09732835

01 FC:1814 110.00 DA

Fee \$110.00

Fee Calculation: TOTAL AMOUNT OF PAYMENT: \$110.00

CERTIFICATE OF MAILING
37 CFR §1.8

I hereby certify, pursuant to 37 CFR §1.8, that I have reasonable basis to expect that that this paper or fee (along with any referred to as being attached or enclosed) would be mailed or transmitted on or before the date indicated with the United States Postal Service with sufficient postage as first class mail on the date shown below in an envelope addressed to the Mail Stop Fee-Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Dated: December 19, 2003

Signature of Person Mailing Document

DOCSOC1:145799.1

Applicant : Steven N. Roe et al.
Appl. No. : 09/732,835
Examiner : Kathryn P. Ferko
Docket No. : 701879.5 (formerly 257/271)

- A. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to Deposit Account No. 15-0665.
- ☒ Charge any additional fee required under 37 CFR 1.16 and 1.17 to Deposit Account No. 15-0665.
- B. ☐ Payment Enclosed
☐ Check ☐ Credit Card ☐ Money Order ☐ Other

| | | | | | | | | |
|--|-------|-----------------|--------------------------|---|---|---|---------|---------------|
| Total Claims | 41 | - | 43 | = | 0 | x | \$18.00 | \$0.00 |
| Independent Claims | 4 | - | 4 | = | 0 | x | \$86.00 | \$0.00 |
| Multiple Dependent Claims | \$290 | (if applicable) | <input type="checkbox"/> | | | | | \$0.00 |
| TOTAL OF ABOVE CALCULATIONS | | | | | | | | \$0.00 |
| Reduction by 1/2 for Filing by Small Entity. Note 37 CFR §§ 1.9, 1.27, 1.28. <input type="checkbox"/> | | | | | | | | \$0.00 |
| Extension of Time (from above) | | | | | | | | \$0.00 |
| Assignment -- \$40 (if applicable) <input type="checkbox"/> | | | | | | | | \$0.00 |
| TOTAL FEES SUBMITTED HERewith | | | | | | | | \$0.00 |

Respectfully submitted,

ORRICK, HERRINGTON & SUTCLIFFE LLP

Dated: December 19, 2003

By: 

Mark Stirrat
Reg. No. 50,756

Orrick, Herrington & Sutcliffe LLP
4 Park Plaza, Suite 1600
Irvine, CA 92614-2558
Tel. 949-567-6700
Fax: 949-567-6710
Customer Number: 34313